COVID-19 Vaccination Record Card

Please keep this record card, which includes medical information about the vaccines you have received.

Por favor, guarde esta tarjeta de registro, que incluye información médica sobre las vacunas que ha recibido.

Carter, Jervier

Last Name First Name MI

11-2-72

Date of birth

12781

Patient number (medical record or IIS record number)

Vaccine	Product Name/Manufacturer Lot Number	Date	Healthcare Professional or Clinic Site
1st Dose COVID-19	MODERNA 048B21A	5/13/21 mm dd yy	K. Edwards
2nd Dose COVID-19	MODERNA 025C21A	06/11/21 mm dd yy	J. Smith
Other	moderna 016F21A	12/10/21 mm dd yy	viral solutions
Other		__/__/__ mm dd yy	